Docket No.: 122481

DECLARATION UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: NEW SOLUBLE AND STABILIZED TRIMERIC FORM OF GP41 POLYPEPTIDES

described and claimed in international application number PCT/IB2004/002433 filed July 29, 2004.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

US Provisional Application N° 60/490,946 filed July 30, 2003

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

l	Typewritten Fi					
	of Sole or Firs	t Inventor		Sylvain		FLEURY
2	Inventor's Signature:			Siyerr Name		Family Name
3	Date of Signature:		D06	Q8	1 02006	
				Month	Day	Year
	Residence:		Lausanne			Switzerland
	Citizenship:	Canada	City		State or Province	Country
	Post Office Address: (Insert complete mailing address, including country)			Chemin de Verdonnet 9		
				CH-1010 Laus	sanne, Switzerland	

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE (Discard this page in a sole inventor application)

1	Typewritten Full Name			
	of Joint Inventor	Marc	P	GIRARD
2	Inventor's Signature:	Given Name Win C	Middle Initial	Family Name
3	Date of Signature:	06	OF	2006
		Month	Day	Year
	Residence:	Lyon		France
		City	State or Province	Country
	Citizenship: France			

		rt complete mail		nce	
	Typewritten Full Name of Joint Inventor		Marie-Gaëlle		ROGER
2	Inventor's Signatur	e:	Given Name Marie - Gaëlle	Middle Initial	Family Name
3	Date of Signature:		06	08	2006
			Month	Day	Year
	Residence: Citizenship: France		Grenoble		France Country
			City	State or Province	
	Post Office Address: (Insert complete mailing address, including country		5, rue de New Yor	k	
				e, France	
	Typewritten Full Na	me			
	of Joint Inventor		Nicolas		MOUZ
			Given Name	Middle Initial	Family Name
	Inventor's Signatur	e:	Nichas		MOUNTE
	Date of Signature:		06	08	7 00 W
			Month	Day	Year
			Grenoble		France
	Citizenship: France		City	State or Province	Country
	Post Office Address:		16, rue Helbronner	•	
	(Insert complete mailing address, including country)		ling ountry) F-38000, Grenoble	France	1
	Typewritten Full Na	me			
	of Joint Inventor		Pierre-François		SERRES
	Inventor's Signatur	e:	Given Name	Middle Initial	Family Name
	Date of Signature:				
	P11		Month	Day	Year
	Residence: Saint-C		aint-Genis Laval	Ctata an D	France
	Citizenship:		City	State or Province	Country
	Post Office Address: (Insert complete mailing		9, allée Euphrosyn	е	
	addre	n complete mail	untry) <u>F-69230 Saint-Ger</u>	nis Laval, France	

39, rue Saignemartin

Post Office Address:

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.